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(Requesto	or's Name)
(Address)	
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COVER LETTER

TO:

Registration Section
Division of Corporations

SUBJECT:

EVERGREEN HOMES OF LAKE WORTH, LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

DAVID LOPEZ

Name of Person

EVERGREEN HOMES OF LAKE WORTH, LLC

Firm/Company

9144 FOREST HILL BLVD

Address

WELLINGTON, FL 33411

City/State and Zip Code

CORPORATE@REALTYELITEUSA.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

DAVID LOPEZ

561 964-9566 EXT. 216

Name of Person

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

■ \$25.00 Filing Fee

□\$30.00 Filing Fee & Certificate of Status

□\$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

□\$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

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MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

EVERGREEN HOMES OF LAKE WORTH, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Compar	ny were filed on 12/11/2006	_ and assigned
Florida document number L06000117568		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lia	ability company here:	
The new name must be distinguishable and end with the words "Lin" L.L.C."	mited Liability Company," the designation "LL	C" or the abbreviation
Enter new principal offices address, if applicable:		<u></u>
(Principal office address MUST BE A STREET ADDRESS)	<u> </u>	15-2 15-20
		44.0 CC
		C)
Enter new mailing address, if applicable:	(6) 1 (7)	Ö
(Mailing address MAY BE A POST OFFICE BOX)	72.	25
		<u></u>
	126	~
B. If amending the registered agent and/or registered registered agent and/or the new registered office address he		name of the new
Name of New Registered Agent:		····
New Registered Office Address:		
	Enter Florida street addre	ss
	, Florida	
	City	Zip Code
New Registered Agent's Signature, if changing Registered Agen	<u>t:</u>	
I hereby accept the appointment as registered agent and as the provisions of all statutes relative to the proper and com accept the obligations of my position as registered agent as	plete performance of my duties, and I am	familiar with and

being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability

company has been notified in writing of this change.

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager MGRM = Managing Member

<u>Title</u>	<u>Name</u>	Address Type of Action
MGRM	DAVID LOPEZ	9144 FOREST HILL BLVD. Add
		WELLINGTON, FL 33411
MGR	WILLIAM A. TAVERNISE	9144 FOREST HILL BLVD. Add
		WELLINGTON, FL 33411 Remove
MGR	JANET M. FARINATO	9144 FOREST HILL BLVD.
		WELLINGTON, FL 33411 Remove
		Add Remove
		Remove
		Add
		Add
		Remove

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Filing Fee: \$25.00

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